

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H-L	21 1079	1/30/01 05/31/01
RESPONSE FORMALITY REVIEW	jpl	1030	9-21-01

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	1/20/01
2	1/21/01
3	1/22/01
4	1/23/01
5	1/24/01
6	1/25/01
7	1/26/01
8	1/27/01
9	1/28/01
10	1/29/01
11	1/30/01
12	1/31/01
13	2/1/01
14	2/2/01
15	2/3/01
16	2/4/01
17	2/5/01
18	2/6/01
19	2/7/01
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28	2/16/01
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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 REC'D  
SSS  
a/2/01

1/31